

**Willie M. Section
Division of Mental Health,
Developmental Disabilities, and
Substance Abuse Services
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

and

**Willie M. Programs Section
Division of Exceptional Children's Services
DEPARTMENT OF PUBLIC INSTRUCTION**

**PERFORMANCE EXPECTATIONS
FOR LOCAL
WILLIE M. SYSTEMS OF SERVICE**

July 1, 1992

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I. SUMMARY OF WILLIE M. ENTITLEMENTS

PRINCIPLE: NC Administrative Rules

PERFORMANCE EXPECTATIONS:

- A. Mental Health demonstrates its role, as *lead agency*, by providing direction, leadership, and “vision” to other community agencies and individuals in guaranteeing the client’s entitlements as stipulated in the NC Statutes and Administrative Rules. Leadership is evident in service development, reflecting a commitment to provide what the client actually needs and the determination to do “what it takes” to effect appropriate services. The service system actually delivers the services needed by the child immediately, to the extent available, or arranges for them to be developed, (pending the availability of funds) within thirty (30) days of identification of the child’s need, or acknowledges that it does not have the capability of providing what is needed and requests State assistance.
- B. All of the client’s plans and all actions taken to implement the client’s plans are driven by a thorough understanding of the child, his environment, and his actual needs. The program develops or obtains a thorough and accurate clinical formulation of the child, his needs, and his potential.
- C. A written, outcome-based plan (*Treatment/Habilitation Plan*) is in place and working for each client within thirty (30) days of eligibility. The plan describes the child’s exit goals anticipated at age eighteen. This client-centered plan addresses the client’s needs as described in the NC Statutes and Administrative Rules, and is derived from an understanding of the child’s realistic potential at age eighteen. By at least age sixteen, every client has a transition plan in place. The client’s educational plan provides for appropriate educational services leading toward graduation with a diploma, or a certificate, if appropriate.
- D. Determinations of whether a child is appropriately served or is in interim status reflect an understanding of and commitment to the child’s entitlements, as defined by the NC Statutes and Administrative Rules, and the system’s responsibility to deliver the services the child actually needs.
- E. Plans and actions reflect a program philosophy and a set of beliefs and values that are consistent with the NC Statutes and Administrative Rules.
- F. All plans and actions reflect an understanding that the child needs and the NC Statutes and Administrative Rules mandate that all involved work together to implement a “24-Hour Plan” treating the whole child (e.g., T/HPs are the product of a genuine interagency effort to plan for and serve the child).
- G. All plans and actions reflect an understanding of and commitment to the NC Statutes and Administrative Rules mandate that services be provided to the child in the Least Restrictive Environment consistent with the child’s needs and the safety of the community.

- H. The service system demonstrates a commitment to keeping the client in habilitation services rather than in correctional settings (e.g., written plans with service recommendations are always prepared and presented to court; programs advocate for and use interventions other than legal charges as consequences of behavior).
- I. All plans and services reflect a client-centered and family-centered focus, with concrete evidence that all clients and their families are actively and meaningfully engaged in their own plans and services (e.g., the needs and preferences of the client are reflected in the actual plan; the child and parent participate in the T/HP and IEP meetings, etc.).
- J. Resources in the environment are utilized and barriers are resolved, both for the child and the service system, to facilitate the delivery of appropriate services (e.g., “natural” helpers within the child’s own environment — neighbors, extended family members, employers — are used, where appropriate, to address the child’s needs; personnel policies, budgetary practices, and so forth, do not prevent or delay the timely provision of services).
- K. The client has a “home,” even if it is not his natural home, which provides him with a safe, nurturing environment conducive to the achievement of all of his other goals and objectives.
- L. The client experiences a minimum of residential and educational service movements and minimal disruptions in relationships. All program components concretely address the need for stability in the child’s life and to help him develop trusting relationships.

II. PERSONNEL SELECTION, MANAGEMENT, AND DEVELOPMENT

PRINCIPLE: All staff serving **Willie M.** clients are carefully selected, well-trained, and share a commitment to do “whatever it takes” to provide each client with the services he needs and to which he is legally entitled.

PERFORMANCE EXPECTATIONS:

- A. The selection of staff is based on an understanding and demonstration of “what it takes” to serve clients, and all staff have, through training or selection, the skills necessary to do their assigned jobs.
- B. All staff receives administrative and clinical/programmatic supervision required to perform their jobs effectively.
- C. Continuity of relationships between staff and children is reflected in length of employment and low staff turnover in key staff positions.
- D. There is a demonstrated commitment to the development of skills needed by the staff in the performance of their jobs, and to the enhancement of the skills that staff need in order to advance professionally within the **Willie M.** service system.

III. ADVOCACY

PRINCIPLE: Each **Willie M.** program is skillful in formulating a wide range of strategies and in forging the alliances necessary to ensure that each client receives the services he needs and to which he is legally entitled.

PERFORMANCE EXPECTATIONS:

- A. The system ensures that every client has at least one person who is also an advocate, friend, or confidant; who maintains a long-term relationship with the child, fostering trust, self-esteem, and social competence (e.g., case manager, therapist, court counselor, parent/family member, mentor, etc.).
- B. The system demonstrates success in getting what the child needs from people and entities outside the system (e.g., community recreational services, creative and individualized employment opportunities in the private sector, church resources, etc.).
- C. The system demonstrates effectiveness in advocating for and securing services for the client which are viable alternatives to the correctional system. Written plans are developed and provided to the court in consultation with the State and consistent with the philosophy of the NC Statutes and Administrative Rules.

IV. CLIENT/STAKEHOLDER SATISFACTION

PRINCIPLE: Every **Willie M.** client is “connected” to the system, receives the services he needs and to which he is legally entitled, benefits from these services, and views the system as both willing and able to help him.

PERFORMANCE EXPECTATIONS:

- A. There is a high rate of parent/guardian agreement for participation in services.
- B. There is a general willingness of local courts to agree, based on the credibility and demonstrated effectiveness of the local program, to plans presented on behalf of clients.
- C. There is a demonstration that each child believes that the system wants to and can help, and that the child is “connected” to the system.
- D. Stakeholders view the system as effective in providing for the client’s needs.

V. RESOURCE MANAGEMENT

PRINCIPLE: Each Lead Agency is able to assess the client's needs, plan appropriately to meet those needs, access or develop the resources needed by the client, and to do so in the most cost-effective manner possible.

PERFORMANCE EXPECTATIONS:

- A. Specific service costs are in line with statewide norms.
- B. The system demonstrates a willingness to consider and use alternative methods of delivering services to improve cost-effectiveness.
- C. Specific child needs, collective child needs, and program operational concerns are all considered and balanced in budget and service development decisions, with specific child needs holding the greatest weight.
- D. Programs, staffing, and budgets are changed as the needs of the child change.
- E. The system demonstrates effectiveness in securing all applicable and available third-party resources (e.g., Medicaid, SSI, insurance, patient fees, etc.).

SYSTEM PERFORMANCE EXPECTATIONS

DEFINITIONS OF TERMS

APPROPRIATE: A determination that a client's unique needs have been accurately determined, and habilitation services consistent with and sufficient to meet those needs are actually provided in the least restrictive manner.

CLIENT: The child or adolescent who, by virtue of his or her eligibility as a client in the **Willie M.** program, is entitled to treatment and habilitation services consistent with NC Statutes and Administrative Rules.

ENTITLEMENT-DRIVEN: The identification, development, and delivery of services for each client based on the recognition that the client has a *legal right* to these services.

HABILITATION: Providing each child with the medical treatment, education, training and care suited to his needs, which affords him a reasonable chance to acquire and maintain those life skills that enable him to cope as effectively as his own capabilities permit with the demands of his own person and of his environment and to raise the level of his physical, mental and social efficiency.

INTERIM: A *temporary condition* in which a client is waiting for the identification, development, and/or provision of the habilitation and/or educational services he needs, and to which he is entitled under the terms of the NC Statutes and Administrative Rules.

LEAD AGENCY: The designation of the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services and its designees at the local level, as the agency charged with coordination and organizational responsibilities for ensuring that all other agencies within the Department of Health and Human Services, and their designees at the local level, as well as the Department of Public Instruction, and its designees at the local level, collaborate effectively on behalf of each client.

LEAST RESTRICTIVE ENVIRONMENT: The most normal conditions appropriate for the client, based on an accurate assessment of the child's physical, emotional, psychological, and social needs, with community safety issues being given due consideration.

SERVICE ACCESS: The effective acquisition and utilization of existing services which are consistent with and sufficient to meet the identified needs of a client.

SERVICE DEVELOPMENT: The creation of a new service when no appropriate service exists, or the adapting, upgrading, or combining of existing services to meet the client's needs.

SERVICE PROVIDER: Community agencies, facilities, and/or individuals, within the Department of Health and Human Services, the Department of Public Instruction, their local agencies or contract designees, who provide services to **Willie M.** clients consistent with their *Treatment/Habilitation Plans*.

STAKEHOLDERS: Parents, guardians, family members, community agencies, court counselors, teachers, Guardians ad Litem, attorney advocates, and others having an interest and an investment in the client's health, happiness, and well-being.

SYSTEM: Within a local community, the "system" is the interrelated, interactive, and interdependent group of formal agencies, and informal or "natural supports," which work *together* to deliver the "package of services" that each client needs. Agencies within the local *system* include area mental health authorities and local education agencies, and departments of Social Services and Juvenile Justice. Natural supports include extended family, community groups, churches, etc.